Paid $40.00 Statesville
11-13-13

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Application For:
( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit (X) Authorization to Construct ( ) Existing System Inspection ( ) Septic System Repair

THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS.

Page 2: *Site Plan Worksheet* form MUST accompany this application

The following optional attachments may also be submitted: ( ) Survey Plat, scaled no more than 1 inch = 60 feet
Place an (X) beside whichever is submitted if applicable ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information:

Applicant Name: Bobby Axsom **Address:** 166 Wynswept Dr. Mooresville NC 28117 **Phone:** 704-881-2004

Owner Name: Same **Address:** _____ **Phone:** _____

Property Information:

Street Address: Charter Pl.

Subdivision Name: CLT **Section/Phase:** 8 **Lot Number:** 384

Driving Directions: BSR, TR McKendree, TR Dish Cir, TR Charter Pl, at end

Site Development Information: *(check or complete ALL that apply)*

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: _____
(X) Swimming Pool
( ) Other Addition/Structure: _____

( ) Crawl Space Foundation
( ) Concrete Slab Foundation
(X) Basement with Plumbing
( ) Basement without Plumbing

Non-Residential Site Development:
Type of Business: _____
Square Footage of Building: _____
Maximum Number of Employee: _____
Maximum Number of Seats/Beds/Other: _____

Water Supply:

(X) New Well ( ) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* **Year existing system installed:** _____

(X) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

Please answer the following to the best of your ability:

( ) Yes (X) No **Does the site contain any jurisdictional wetlands?**
( ) Yes (X) No **Is any non-domestic sewage (i.e. industrial) to be generated?**
( ) Yes (X) No **Is the site subject to approval by any other public agency?**

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Signature: _____
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

11/13/2013
DATE

IREDELL COUNTY HEATLH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAGE 2: *SITE PLAN WORKSHEET*

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

- X — Property Line measurements are clearly identified...
- X — All proposed structures are indicated...
  SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site
- X — Front and side setbacks from property line...
- X — Preferred driveway location and configuration, preferred well location...
- X — Area you prefer your septic system to be placed...
- X — North arrow, or other sufficient indicator of direction...

Circle N/A on the following if appropriate:

- X — Location of septic systems and wells within 100' of your property... N/A
- X — Location of easements and rights of ways on your property... N/A
- X — Location of any designated wetlands on the property... N/A

Signature: _____ 11/13/2015

REQUIRED property ~~owner~~ or owner's legal representative signature. **DATE**

USE THIS SPACE TO DRAW YOUR SITE PLAN

See Attached Plan



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
1999 CANDLEWICK DRIVE
FORT MILL, S.C. 29715
803-802-4403 (office)
803-802-4402 (fax)

Reference: Data Sheet for CL&T Sec. 8, Lot 384, Charter Pl.
House Footprint: see attached plan
Building Setbacks: 35' front, 15' side, 50' lake
Water Source: Private well
Number of Bedrooms: 4/480 GPD
Proposed LTAR: 0.3 GPD/F2
Proposed System Type: PPBPS
Proposed Repair System Type: Partial Pretreatment 25% reduction
Distribution: Low pressure
Flow per Orifice: 0.59 GPM
Orifice Size: 3/16"
System Flow: 37.17 GPM
Dosing Volume: 226.8 gallons
Pump Run Time: 6.1 minutes
Elevation Head: 3.7'
Friction Head: 0.5'
Pressure Head: 2'
Total Dynamic Head: 6.2'
Supply Line Length: 15'
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 29"

Line	Design Length	Actual Length	Elevation
White 1	**90'**	**90'**	**4.2'**
Blue 2	**90'**	**90'**	**6.7'**
Orange 3	**90'**	**90'**	**9.3'**
Pink 4		93'	11.5
White 5		140'	14.3'

Initial System: 270' (63 panels) **Repair System:**
Pump Tank: 2.9' **House Corner:** 1.7' **Benchmark:** 23.1'

Comments:
This lot was deeded in 1978 (Book 15, Page 73). The system is laid out on 8' centers.

I Lance D. Schamback, certify that this plat was drawn under my supervision from an actual survey made under my supervision (deed description and/or Map Book: 15, Page 73. That the boundaries not surveyed are clearly indicated as drawn from information as shown survey; that the ratio of precision as calculated is 1: 10,000+ that this plat was prepared in accordance with G.S. 89-C as amended. Witness my original signature, registration number and seal this 9 day of September, A.D. 2013.

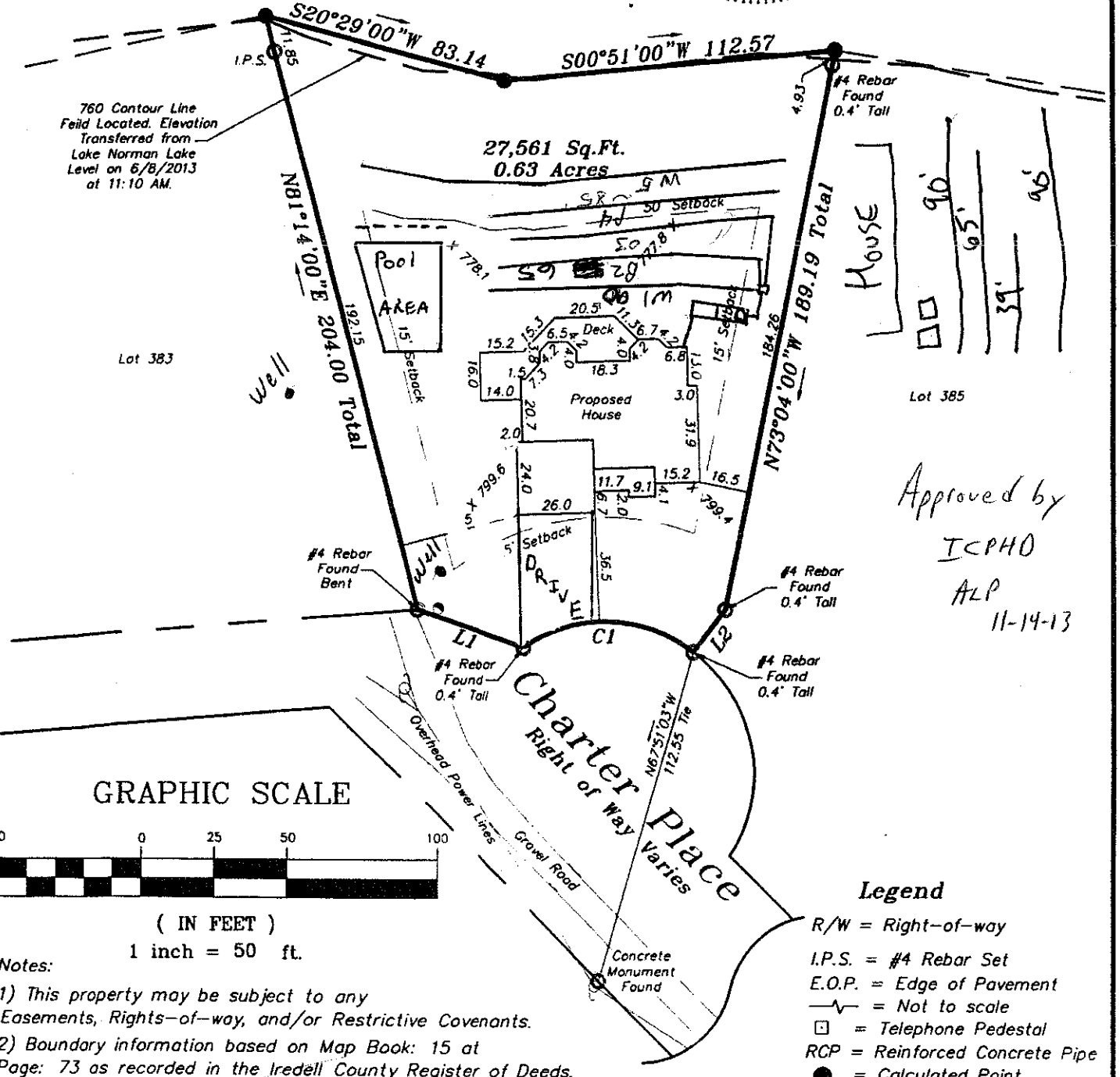
CURVE TABLE				
CURVE	LENGTH	RADIUS	BEARING	CHORD
C1	61.86	50.00	N07°03'12"E	57.99

LINE TABLE		
LINE	LENGTH	BEARING
L1	38.32	S24°33'00"W
L2	17.51	S47°28'51"E

NORTH CAROLINA PROFESSIONAL SEAL L-4295 LAND SURVEYOR LANCE D. SCHAMBACK

Lance D. Schamback, PLS
LICENSE NUMBER: L-4295

Lake Norman



Approved by ICPHO ALP 11-14-13

GRAPHIC SCALE

50 0 25 50 100

(IN FEET)

1 inch = 50 ft.

Notes:

1) This property may be subject to any Easements, Rights-of-way, and/or Restrictive Covenants.

2) Boundary information based on Map Book: 15 at Page: 73 as recorded in the Iredell County Register of Deeds.

3) This survey is of an existing parcel or parcels of land.

4) No N.C.G.S. or U.S.G.S. Monuments

Legend

R/W = Right-of-way
I.P.S. = #4 Rebar Set
E.O.P. = Edge of Pavement
—∿— = Not to scale
⊡ = Telephone Pedestal
RCP = Reinforced Concrete Pipe
● = Calculated Point
WM ⊠ = Water Meter
= Utility Pole

AREA CALCULATIONS

HEATED:
MAIN FLOOR PLAN ..... 2,116 S.F.
SECOND FLOOR PLAN ..... 667 S.F.
LAKE LEVEL PLAN ..... 1,792 S.F.
TOTAL HEATED ..... 4,575 S.F.

UNHEATED:
GARAGE ..... 622 S.F.
BONUS ROOM ..... 396 S.F.
SCREENED PORCH ..... 189 S.F.
FRONT PORCH ..... 183 S.F.
LAKE STORAGE ..... 373 S.F.

TOTAL UNDER ROOF ..... 6,338 S.F.

UPPER FLOOR WALLS AND CEILING FRAMING NOTES:

① = 2x8 C.J. @ 16" O.C. (SPF # 2)

② = # OF JACK STUDS UNDER BEAM (TYP.)

#jeK @ RE = # OF JACK STUDS AND # OF KING STUDS AT EACH END OF BEARING ALL INTERIOR/EXTERIOR LOAD BEARING HEADERS TO BE 2) 2x8'S U.N.O. W/ 1/ ,1K R.E. UNLESS NOTED OTHERWISE

MAIN FLOOR WALLS AND CEILING FRAMING NOTES:

① = 2x8 C.J. @ 16" O.C. (SPF # 2)

② = 11 7/8" PRI-40 JOISTS @ 19.2" O.C.

② = # OF JACK STUDS UNDER BEAM (TYP.)

#jeK @ RE = # OF JACK STUDS AND # OF KING STUDS AT EACH END OF BEARING ALL INTERIOR/EXTERIOR LOAD BEARING HEADERS TO BE 2) 2x10'S U.N.O. W/ 1/ ,1K E.E. UNLESS NOTED OTHERWISE

PLACE AN EXTRA JOIST UNDER ANY PARALLEL WALL GREATER THAN 5'-0" IN LENGTH

TRANSFER ALL POINT LOADS FROM ABOVE THROUGH TO THE LOWER LEVEL WITH AN EQUAL AMOUNT OF STUD MATERIAL

WALL STUD REQUIREMENTS

EXT. WALL HEIGHT IN	STUD SIZE AND SPACING
h = LESS THAN OR EQUAL TO 10'-0"	2x4 @ 16" O.C.
h = 10'-0" TO 11'-0"	2x4 @ 12" O.C.
h = 11'-0" TO 12'-0"	2x6 @ 16" O.C.
h = GREATER THAN 12'-0"	CONSULT ENGINEER

WARRANTY AND LIABILITY

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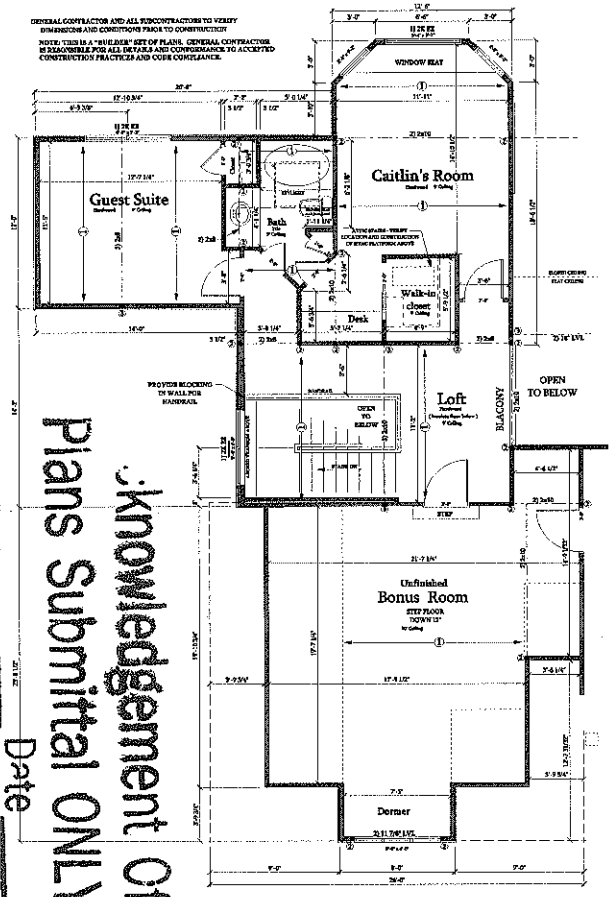
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FRAMING NOTES

1) VERIFY PLUMBING DRAIN LOCATIONS DURING LAYOUT; ADJUST JOIST LOCATIONS TO AVOID TOILET, SHOWER, AND SINK DRAINS. VERIFY RETURN AIR LOCATIONS AND HVAC ATTIC PLATFORMS WITH G.C.
2) PROVIDE THERMO-PLY BEHIND ALL TUBS AND SHOWERS AGAINST EXTERIOR WALLS. BEHIND ALL KNEEWALLS WITH ATTIC SPACE BEHIND, AND AROUND STAIRWAYS AS REQUIRED BY THE 2012 IRC BUILDING CODE
3) ANY DISCREPANCIES ON THESE PLANS MUST BE BROUGHT TO THE ATTENTION OF THE BUILDER PRIOR TO PROCEEDING WITH THE WORK. FAILURE TO DO SO WILL MAKE THE VENDOR RESPONSIBLE FOR CORRECTION.
4) VERT LOCATION AND SIZE OF ATTIC STAIRS AND HVAC PLATFORM IN ATTIC WITH G.C. DURING CONSTRUCTION
5) PROVIDE BLOCKING FOR GRAB BARS IN ALL BATHROOMS LOCATE PER HOMEOWNER / G.C. SPEC'S
6) LAP SUBFLOOR FRAMES MIN. 12" AWAY FROM LVL BEAMS IN THE FLOOR SYSTEM

GENERAL CONTRACTOR AND ALL SUBCONTRACTORS TO VERIFY DIMENSIONS AND CONDITIONS PRIOR TO CONSTRUCTION

NOTE: THIS IS A "BUILDER" SET OF PLANS. GENERAL CONTRACTOR IS RESPONSIBLE FOR ALL DETAILS AND CONFORMANCE TO ACCEPTED CONSTRUCTION PRACTICES AND CODE COMPLIANCE.



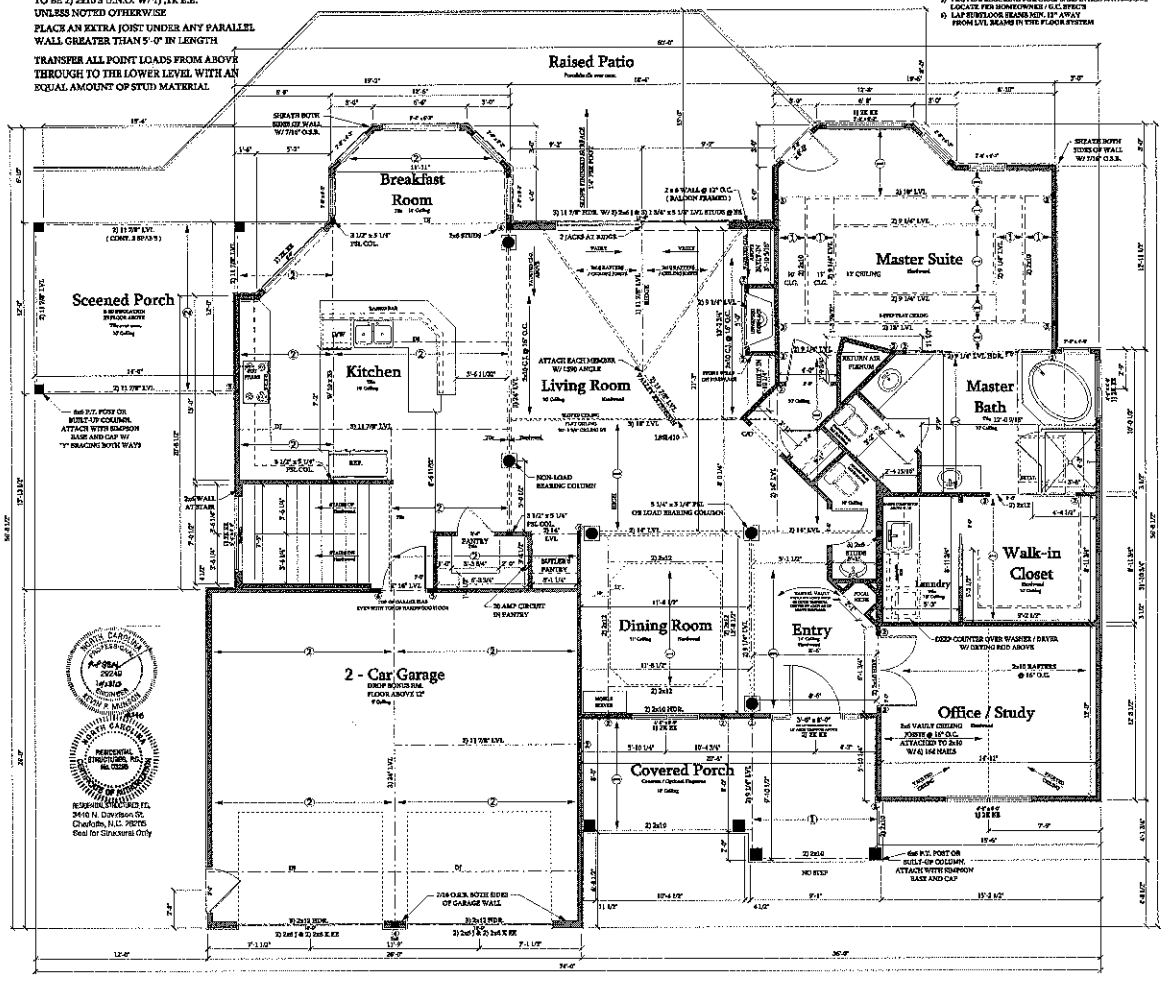
Plans Submittal ONLY!

"Acknowledgement Of

Date

2 A-1 UPPER LEVEL PLAN

SCALE: 1/4" = 1'-0"



1 A-1 MAIN LEVEL PLAN

SCALE: 1/4" = 1'-0"

WINDOW NOTE:

IN DWELLING UNITS, WHERE THE OPENING OF AN OPERABLE WINDOW IS LOCATED MORE THAN 72 INCHES ABOVE THE FINISHED GRADE OR SURFACE BELOW, THE LOWEST PART OF THE CLEAR OPENING OF THE WINDOW SHALL BE A MINIMUM OF 24 INCHES ABOVE THE FINISHED FLOOR OF THE ROOM IN WHICH THE WINDOW IS LOCATED. OPERABLE SECTIONS OF WINDOWS SHALL NOT PERMIT THE OPENING THAT ALLOW PASSAGE OF A 4 INCH DIAMETER SPHERE WHERE SUCH OPENINGS ARE LOCATED WITHIN 36 INCHES OF THE FINISHED FLOOR. THE WINDOW SUPPLIER IS SOLELY RESPONSIBLE FOR ASSURING THAT ALL WINDOWS, REGARDLESS OF EGRESS DESIGNS, COMPLY WITH THE 2012 IRC SECTIONS CODE.

10-24-13

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Date 11-18-13

Plans by: U.S. HOME DESIGNS, INC.
7810 Peach Blossom Ct. Huntersville, NC 28117 Phone: 704-664-4430
Designer: Stephen W. Turney cell: 704-309-8762 swturney@msn.com
www.ushomedesigns.com

Axsom Residence

MAIN AND UPPER FLOOR PLANS

SCALE: 1/4" = 1'-0"

SHEET No. A-1 OF 6

10" POURED CONCRETE FOUNDATION WALL VERTICAL REINFORCEMENT (V)											
BACKFILL HEIGHT "E"	WALL HEIGHT "h"										
	8'-0"	8'-6"	9'-0"	9'-6"	10'-0"	10'-6"	11'-0"	11'-6"	12'-0"	12'-6"	13'-0"
4'-0"	NONE	NONE	#4@18"	#4@16"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"
4'-6"	NONE	NONE	#4@18"	#4@16"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"
5'-0"	NONE	NONE	#4@18"	#4@16"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"
5'-6"	NONE	NONE	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"
6'-0"	NONE	NONE	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"
6'-6"	NONE	NONE	#4@18"	#4@18"	#5@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"
7'-0"	NONE	NONE	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"
7'-6"	NONE	NONE	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"
8'-0"	NONE	NONE	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"	#4@18"
8'-6"	-	NONE	#4@18"	#4@16"	#4@18"	#4@18"	#4@18"	#5@18"	#4@18"	#4@16"	#4@16"
9'-0"	-	-	#4@18"	#4@18"	#5@16"	#4@16"	#5@16"	#4@16"	#5@16"	#4@12"	#4@12"
9'-6"	-	-	-	#4@16"	#4@16"	#5@18"	#4@12"	#4@12"	#4@12"	#4@12"	#4@12"
10'-0"	-	-	-	-	#4@12"	#4@12"	#4@12"	#4@12"	#4@12"	#5@16"	#5@18"
10'-6"	-	-	-	-	-	#4@12"	#4@12"	#4@12"	#5@18"	#5@16"	#5@12"
11'-0"	-	-	-	-	-	-	#5@16"	#5@16"	#5@12"	#5@12"	#5@12"
11'-6"	-	-	-	-	-	-	-	#5@12"	#5@12"	#5@12"	#5@12"
12'-0"	-	-	-	-	-	-	-	-	#5@12"	#5@12"	#5@12"
12'-6"	-	-	-	-	-	-	-	-	-	#5@10	#5@10"
13'-0"	-	-	-	-	-	-	-	-	-	-	#5@10"

Horizontal Reinforcement "H" for 10-inch Walls #4@18" o/c
Bent Dowel w/ 16" Projection Into Foundation Wall for 10-inch Walls (to match vertical)
Continuous Rebar @ Bottom Third of Footing for 10-inch Walls (#4 Rebar)
Do not step foundation wall w/ more than 4'-0" unbalanced fill (typ.)

NOTE: THIS IS A "BUILDER" SET OF PLANS. GENERAL CONTRACTOR IS RESPONSIBLE FOR ALL DETAILS AND CONFORMANCE TO ACCEPTED CONSTRUCTION PRACTICES AND CODE COMPLIANCE.

GENERAL CONTRACTOR AND ALL SUBCONTRACTORS TO VERIFY DIMENSIONS AND CONDITIONS PRIOR TO CONSTRUCTION

FOUNDATION NOTES:

- CONCRETE TO HAVE 3000 PSI COMPRESSIVE STRENGTH
- ALL SOIL TO HAVE 2000 PSF MIN. BEARING CAPACITY

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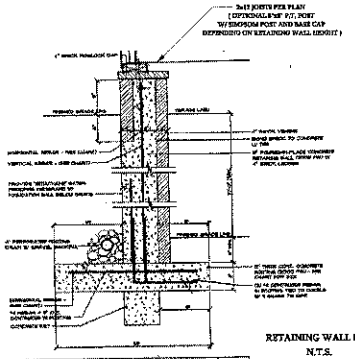
BASMENT WALLS AND CEILING NOTES:

③ = 24" DEEP OPEN WEB FLOOR TRUSSES @ 16" O.C.
④ = 2x12 PT JOISTS @ 8' O.C.
⑤ = 2x12 PT JOISTS @ 12' O.C.
⑥ = 2x12 PT JOISTS @ 16' O.C.
⑦ = 3"x20 GUAGE CORREGATED STEEL PAN W/ 5" CONCRETE TOPPING. SHORE MID-SPAN PRIOR TO POUR AND LEAVE SHORING IN PLACE MIN. 10 DAYS AFTER POUR

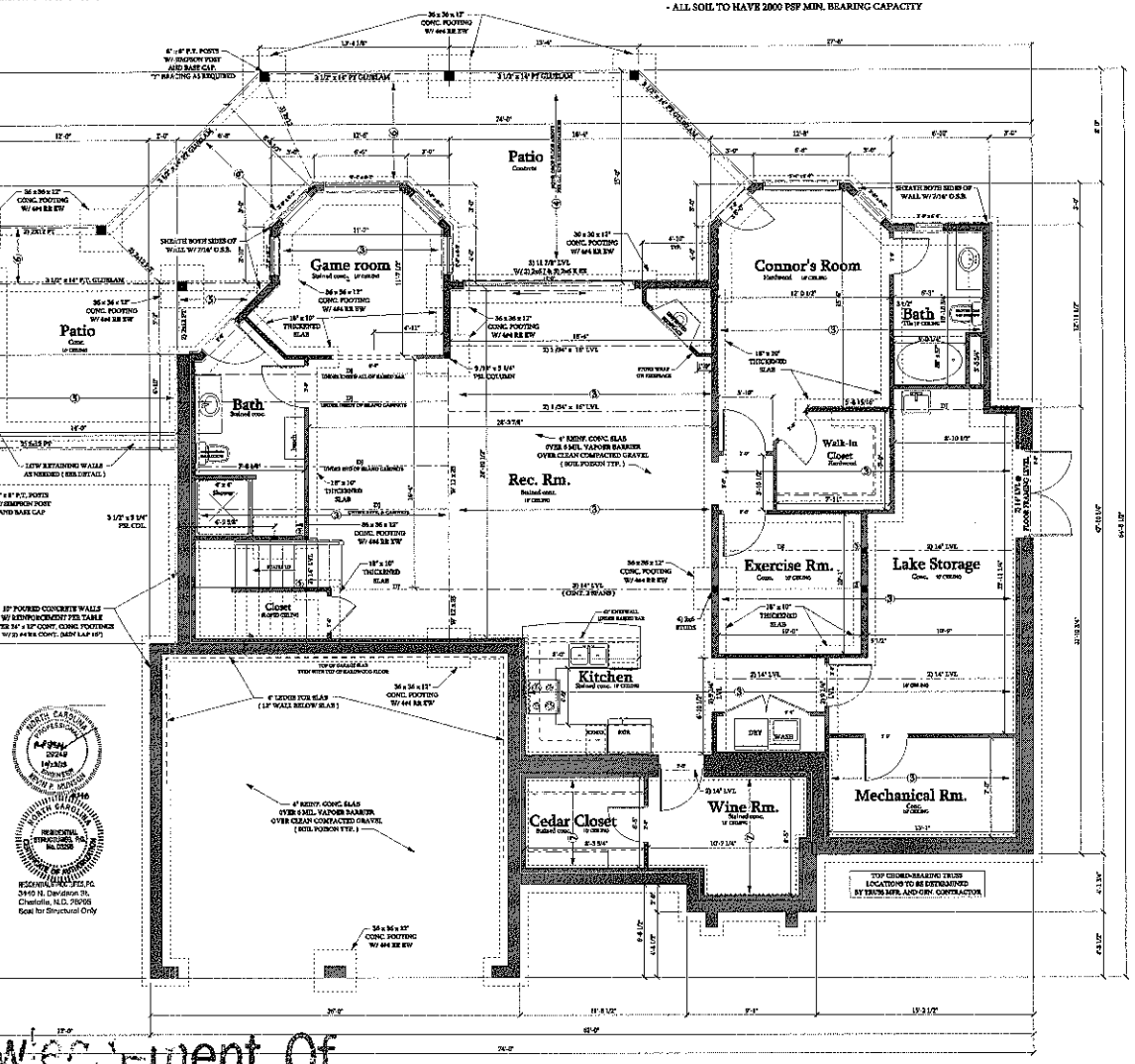
(#) = # OF STUDS UNDER BEAM (TYP.)

- ALL INTERIOR LOAD BEARING HEADERS TO BE (2) 2x 10'S U.N.O. W/ 1 JACK AND 1 KING EACH SIDE U.N.O.
- ALL EXTERIOR LOAD BEARING HEADERS TO BE (2) 2 x 10'S W/ 1 JACK & 1 KING E.E. U.N.O.
- TRANSFER ALL POINT LOADS ABOVE TO FOUNDATION WITH AN EQUAL # OF STUDS
- MIN. ALL A MINIMUM OF (2) 2 x 4 STUDS UNDER ALL BEAMS, LVL'S OR BUILT-UP HEADERS AT THIS FIRST FLOOR LEVEL U.N.O.
- PLACE AN EXTRA JOIST UNDER ANY PARALLEL WALL CREATER THAN 5'-0" IN LENGTH
- ALL FRAMED EXTERIOR WALLS TO BE 2x6 @ 16" O.C. U.N.O.
- ALL INTERIOR LOAD BEARING WALLS TO BE 2x4 @ 12" O.C. OR 2x6 @ 16" O.C. W/ LIT- ON USA PURLIN AT MID-HEIGHT
- TRANSFER ALL POINT LOADS FROM ABOVE TO FOUNDATION BELOW W/ AN EQUAL AMOUNT OF STUD MATERIAL
- PLACE AN EXTRA JOIST UNDER ANY APRALLEL PARTITION WALL WITH GREATER THAN 5'-0" LENGTH.

SEE SHEET A-7 FOR STRUCTUAL NOTES AND DETAILS



RETAINING WALL DETAIL
N.T.S.



NORTH CAROLINA PROFESSIONAL ENGINEER SEAL 20749 10-1-13 REGISTERED RESIDENTIAL STRUCTURES, PE NO. 030586 REGISTERED PROFESSIONAL ENGINEER

RESIDENTIAL STRUCTURES, P.C.
3940 N. Davidson St.
Charlotte, N.C. 28205
Seal for Structural Only

Acknowledgement Of Plans Submittal ONLY!
Date 11-21-13

1 / A-2 LOWER LEVEL PLAN
SCALE: 1/4" = 1'-0"

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Date _____

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Designer: Stephen W. Turley cell: 704-309-0762 swturley@msn.com
www.ushomedesigns.com

Axsom Residence

LOWER FLOOR PLAN
SCALE: 1/4" = 1'-0"

SHEET No. A-2 OF 6

IREDELL COUNTY

PO Box 788
349 North Center St.
Statesville, NC 28677

APPLICATION NUMBER
200159
Issue Date: 11/13/2013

FILE COPY

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4627514720.000	CHARTER PLACE, MOORESVILLE, NC 28117	MOORESVILLE

Owner Information	Applicant Information
Owner: AXSON BOBBY L+AUDRA M	Applicant: MICHAEL ATHANAS & ASSO
Address: 106 WYNSWEPT DR MOORESVILLE, NC 28117	Address: 1999 CANDLEWICK DRIVE FORT MILL, SC 29715
Phone:	Phone: 704-576-3887

Use Requested	Zone Code
SWIMMING POOL	RR

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.730	35.00	50.00	10.00	10.00	CACL	AE

Remarks:

PAID
#2033
11-13-13

The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Applicant: _____ Date: _____

Permit Number	540	TOTAL FEES:	$ 77.25

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet ____ *of* ____
PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Bobby Axsom APPLICATION DATE _____
ADDRESS: _____ DATE EVALUATED: _____
PROPOSED FACILITY: 4 bedroom PROPOSED DESIGN FLOW (.1949): 480 GPD PROPERTY SIZE: _____
LOCATION OF SITE: CL&T, sec. 8 lot 384 Charter Pl. PROPERTY RECORDED: _____
WATER SUPPLY: Ξ Private ☐ Public Ξ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: Ξ Auger Boring Ξ Pit ☐ Cut TYPE OF WASTEWATER: Ξ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
1	PIT LS 25%	0-11	Br SL GR	FR SS SP		47"	PS		PS 0.3
		11-18	Br SCL WSBK	FR SS SP					
		18-47	R C SBK	FR SS SP					
		47-64	LS SAP M	VFR SS SP					
2	PIT LS 25%	0-16	Br SCL WSBK	FR SS SP		49"	PS		PS 0.3
		16-49	R C SBK	FR SS SP					
		49-62	SL SAP M	FR SS SP					
3	PIT LS 25%	0-27	Br SCL WSBK	FR SS SP		47"			PS 0.3
		27-47	R C SBK	FR SS SP					
		47"	ROCK						
4	PIT LS 25%	0-13	Br SCL WSBK	FR SS SP		66"			PS 0.3
		13-66	R C SBK	FR SS SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	540 FT2	540 FT2
System Type(s)	PPBPS	PPBPS
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: M A & Associates
OTHER(S) PRESENT: _____

COMMENTS: _____

SOIL/SITE EVALUATION

(Continuation Sheet)

Sheet ____ of ____

DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

PROPERTY ID #: ____________
DATE OF EVALUATION: ____________
COUNTY: ____________

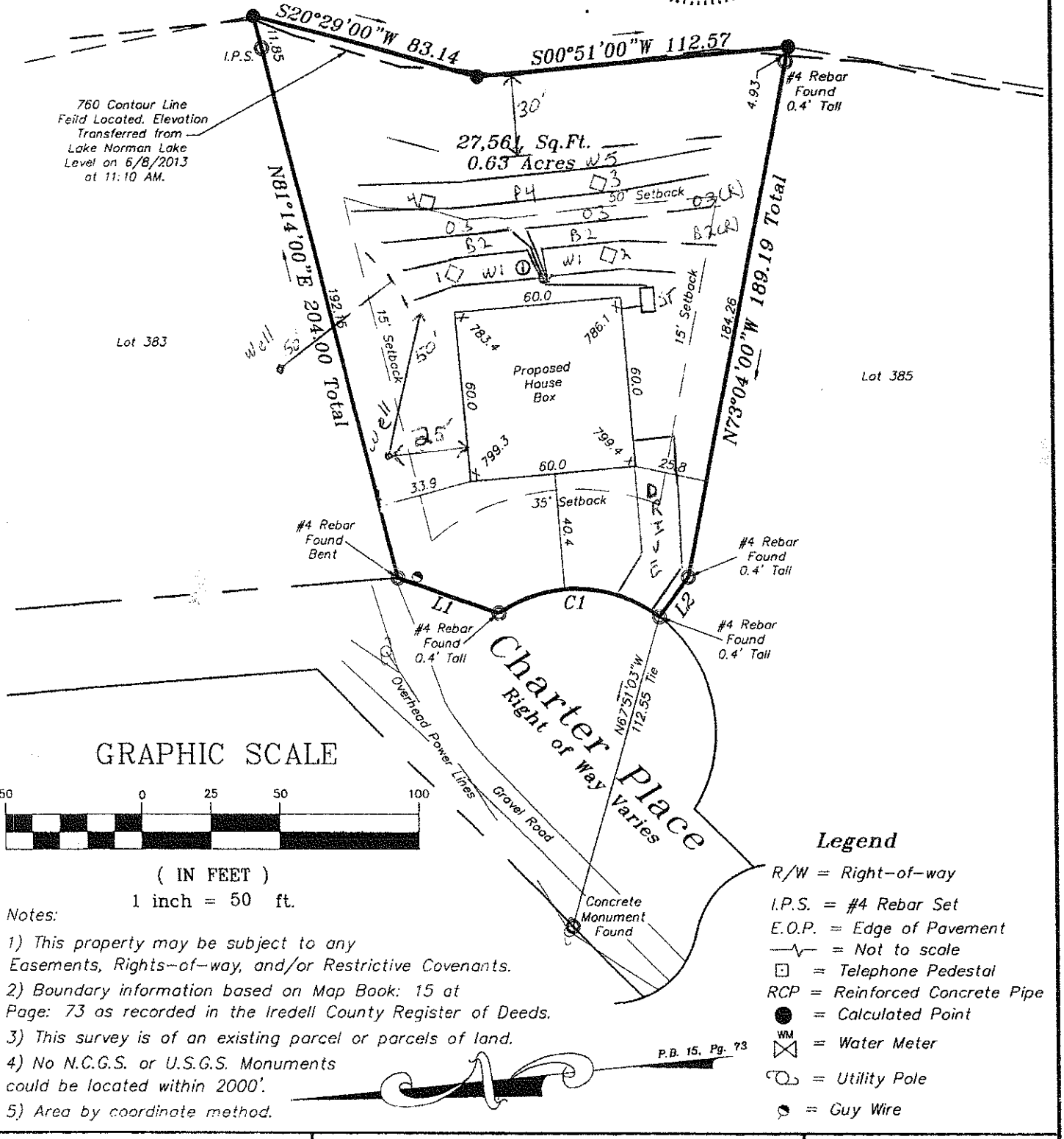
PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
AB 1	LS 25%	0-17	Br SCL WSBK	FR SS SP		47"			PS 0.3
		17-28	R C SBK	FR SS SP					
		28-47	R CL WSBK	FR SS SP					
		47-48	SL SAP M	VFR SS SP					

COMMENTS: ____________

LINE TABLE		
LINE	LENGTH	BEARING
L1	38.32	S24°33'00"W
L2	17.51	S47°28'51"E

Lake Norman

L-4295 LAND SURVEYOR LANCE D. SCHAMBACK



GRAPHIC SCALE

50 0 25 50 100

(IN FEET)

1 inch = 50 ft.

Notes:

1) This property may be subject to any Easements, Rights-of-way, and/or Restrictive Covenants.

2) Boundary information based on Map Book: 15 at Page: 73 as recorded in the Iredell County Register of Deeds.

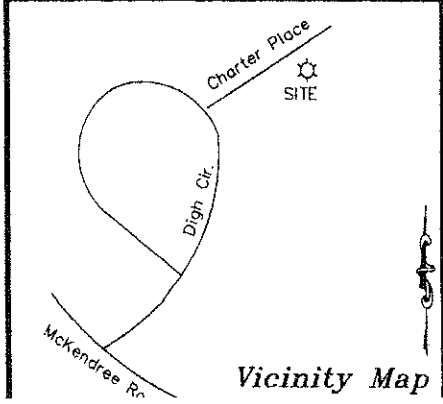
3) This survey is of an existing parcel or parcels of land.

4) No N.C.G.S. or U.S.G.S. Monuments could be located within 2000'.

5) Area by coordinate method.

Legend

R/W = Right-of-way
I.P.S. = #4 Rebar Set
E.O.P. = Edge of Pavement
= Not to scale
= Telephone Pedestal
RCP = Reinforced Concrete Pipe
= Calculated Point
WM = Water Meter
= Utility Pole
= Guy Wire



Vicinity Map

Boundary Survey

FOR

Bobby Lee Axsom, Jr. & Audra Meadows Axsom

PROPERTY DESCRIPTION

Unnumbered Lot Between Lots 383 & 385, Crescent Land and Timber Corp. P.B. 15, Pg. 73

SCALE: 1" = 50

FIELD BOOK:

FILE: 2013-54

Tax Parcel ID#: 4627514720

Schamback Surveying, P.A.
Post Office Box 4143
Mooresville, NC 28117